## ARIZONA FORM 165

## Arizona Partnership Income Tax Return

1996

| 165   |   |  |   | or calendar year 1996 or      |                             | CI                        | IFOK ONE              |      |  |  |
|---|---|--|---|-------------------------------|-----------------------------|---------------------------|-----------------------|------|--|--|
|   |   |  | taxable year beginning  | , 19, and ending _            | , 19                        | . Calendar ye             | ECK ONE ar  Fisc      |      |  |  |
|   | Mail to: Arizona Department of Revenue, PO Box 29079, Phoenix AZ  |  |   |                               | Z 85038-9079                |                           | CHECK ONE             |      |  |  |
| Business telephone number                                   |   |  | Name  |                               |                             |                           | Ameno<br>oyer ID numl |      |  |  |
| ( )   |   |  | Number and street   |                               |                             | AZ withholding tax number |                       |      |  |  |
| Business activity code number (from your federal Form 1065) |   |  |   |                               |                             |                           | _                     |      |  |  |
|   |   | m 1065)  | City or town, state, and ZIP code   |                               | AZ transaction              |                           |                       |      |  |  |
| Check box if:   |   | This is a  | a first return  | Address change                | F                           | or DOR use only           |                       |      |  |  |
| Information<br>68   | Α   | Date bus   | pusiness commenced  |                               |                             |                           |                       |      |  |  |
|   | В   | Street ac  | Street address at which primary business is located                                     |                               |                             |                           |                       |      |  |  |
|   | С   |  |   |                               | -<br>  81                   | 66                        |                       |      |  |  |
|   |   |  |   |                               |                             | •                         | YES                   | NO   |  |  |
|   | D   |  | e partnership's final return?   |                               |                             |                           |                       |      |  |  |
|   | E   | Dia you i  | file 1994 and 1995 Arizona partnership r  | eturns? If no, state reason _ |                             |                           |                       |      |  |  |
|   | F   | -  | ou filed amended federal partnership retu   | ırns for prior years?         |                             |                           |                       |      |  |  |
|   | G   | If yes, list years  G Have you attached a copy of your federal Form 1065 and supporting schedules to this return, including Schedule(s) K-1? |   |                               |                             |                           |                       |      |  |  |
|   | Н   |  |   |                               |                             |                           |                       |      |  |  |
|   | ı   | Is any member of the partnership a trust for the benefit of any person related by blood or marriage to any other member?                     |   |                               |                             |                           |                       |      |  |  |
|   | J Has the Internal Revenue Service made any adjustments in any federal income tax return filed by the partnership not |  |   |                               |                             |                           |                       |      |  |  |
|   |   | •  | sly reported to the department?, , and submit under separate cover a copy of            |                               |                             |                           |                       |      |  |  |
|   |   |  | report as finally determined.   | , and submit                  | under separate cover a copy | OT                        |                       |      |  |  |
|   | K The partnership books are in care of:   located at:   |  |   |                               |                             |                           |                       |      |  |  |
|   |   |  |   |                               |                             |                           |                       |      |  |  |
|   | 1   | Fadaval  | audiaanu kusinaas and vantal inaans /Fs   | 10/F Cabadula K)              |                             | 1                         |                       |      |  |  |
| Adjustment of   |   |  | ordinary business and rental income (Fa<br>s to income from Schedule A                  |                               |                             |                           |                       | 00   |  |  |
| Partnership<br>Income From                                  | 3   |  | s 1 and 2   |                               |                             | <del> </del>              |                       | 00   |  |  |
| Federal to  | 4   | Subtracti  | ions from income from Schedule B  |                               |                             | 4                         |                       | 00   |  |  |
| Arizona Basis   | 5   | 5 Partnership income adjusted to Arizona basis (line 3 minus line 4)   |   |                               |                             |                           |                       | 00   |  |  |
|   | 6   |  | stment from federal to Arizona basis (lin   | ·                             |                             |                           |                       | 00   |  |  |
| Penalty   | 7   | Penalty f  | or late filing or incomplete filing \$500.00  |                               |                             |                           |                       | 00   |  |  |
|   |   |  | ed partner of the partnership for which this recompanying schedules and statements, has |                               |                             | Penalty elief             | Code Ext.             | Code |  |  |
|   |   | rect and c   | omplete return, made in good faith, for the   |                               |                             | Cilci,                    |                       |      |  |  |
| Please  |   |  |   | 1                             |                             |                           |                       |      |  |  |
| Sign Here   | Partner Date Partner's social   |  |   |                               | tner's social security n    | I security number or EIN  |                       |      |  |  |
| Paid  |   |  |   | 1                             |                             |                           |                       |      |  |  |
| Preparer's<br>Use Only                                      | Prep  | arer's signa   | ature   | Date                          |                             | _                         |                       |      |  |  |
|   | Firm'   | s name (or n   | oreparer's, if self-employed)   |                               |                             | Preparer's TIN            |                       |      |  |  |
|   | _   | . \ P  |   |                               |                             |                           |                       |      |  |  |
|   | Firm  | 's address   |   |                               |                             | ZIP code                  |                       |      |  |  |

## **Business** Information

List all places, both within and without Arizona, where the partnership carries on business.

| Street address | City and state | Description of place (i.e. branch office, factory, etc.) | Rented or owned by partnership | Principal product or service |  |  |
|----------------|----------------|--|--------------------------------|------------------------------|--|--|
|                |                |  |                                |                              |  |  |
|                |                |  |                                |                              |  |  |
|                |                |  |                                |                              |  |  |

Attach schedule if more than four locations.

| Schedule A   | A1 Non-Arizona municipal bond interest   | <b>A</b> 1 | 00 |    |    |
|--|--|------------|----|----|----|
| Additions  | A2 Other additions to federal distributive income - attach schedule                  | A2         | 00 |    |    |
| to Income  | A3 Total additions to federal distributive income - enter here and on page 1, line 2 |            |    | A3 | 00 |
|  | B1 Interest from U.S. government obligations   | B1         | 00 |    |    |
| Schedule B   | B2 Difference in adjusted basis of property  | B2         | 00 |    |    |
| Subtractions   | B3 Agricultural crops charitable contribution. See instructions                      | В3         | 00 |    |    |
| From Income  | B4 Alternative fuel vehicles and equipment   | B4         | 00 |    |    |
|  | <b>B5</b> Other subtractions from federal distributive income - attach schedule      | <b>B</b> 5 | 00 |    |    |
| B6 Total subtractions - enter here and on page 1, line 4 |  |            |    | B6 | 00 |

Schedule C Formula (Multistate **Partnerships** Only)

The following information must be submitted by all partnerships having income **Apportionment** from sources both within and without Arizona. Average lines C1(a) through C1(f). Arizona requires a double-weighted sales factor. See instructions on pa

| pages 4 and 5 before completing this section.                               | <b>(a)</b><br>Total<br>within<br>Arizona | <b>(b)</b><br>Total<br>everywhere | (c)<br>Ratio within<br>Arizona<br>(a) / (b) |
|---|--|-----------------------------------|---|
| C1 Average yearly value of real and tangible personal property:             |  |                                   | (=) . (=)                                   |
| (a) Inventory   |  |                                   |   |
| (b) Depreciable assets - at original cost                                   |  |                                   |   |
| (c) Land  |  |                                   |   |
| (d) Other - describe  |  |                                   |   |
| (e) Less construction in progress   |  |                                   |   |
| (f) Less nonbusiness property   |  |                                   |   |
| (g) Net annual rent paid for leased property, multiplied by 8               |  |                                   |   |
| (h) Total real and tangible personal property used                          |  |                                   |   |
| C2 Wages, salaries, commissions, and other compensation of employees        |  |                                   |   |
| as shown per federal Form 1065 or payroll reports                           |  |                                   |   |
| C3 (a) Gross sales, less returns and allowances                             |  |                                   |   |
| (b) Sales delivered or shipped to Arizona purchasers:                       |  |                                   |   |
| (1) Shipped from outside Arizona  |  |                                   |   |
| (2) Shipped from within Arizona   |  |                                   |   |
| (c) Sales shipped from Arizona to:  |  |                                   |   |
| (1) The United States Government  |  |                                   |   |
| (2) Purchasers in a state where the taxpayer would not be                   |  |                                   |   |
| taxable (e.g., under Public Law 86-272)                                     |  |                                   | 1   |
| (d) Other gross receipts (rents, royalities, interest, etc.)                |  |                                   |   |
| (e) Total sales within Arizona  |  |                                   |   |
| (f) Double weight sales factor  | X 2                                      |                                   |   |
| (g) Sales factor ratio. For column (a), multiply line C3 (e) by line C3(f); |  | T                                 | T   |
| for column (b), add line C3(a) and C3(d)                                    |  |                                   |   |
| C4 Total ratio - add lines C1(h), C2 and C3(g) in column (c)                |  |                                   |   |
| C5 Average ratio - divide line C4, column (c) by four (4). Enter the result |  |                                   |   |
| here and on the Arizona Schedule K-1(NR) in column 2                        |  |                                   |   |